

SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	FOR COURT USE ONLY
NAME OF DEFENDANT: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: HOME TELEPHONE NO.: WORK TELEPHONE NO.: DRIVER'S LICENSE NO.:	
DATE OF COURT ORDER:	
IGNITION INTERLOCK INSTALLATION VERIFICATION	CASE NUMBER:

1. Manufacturer:
2. Facility location (*address*):
3. Vehicles:

<u>Make</u>	<u>Model</u>	<u>Year</u>	<u>Color</u>	<u>License Plate No.</u>	<u>VIN:</u>
a.					
b.					
c.					
4. Serial Nos. of units:

a.	b.	c.
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5. Odometer reading:

a.	b.	c.
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6. Date of installation:

a.	b.	c.
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7. Date of next monitor check:

a.	b.	c.
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I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:



(TYPE OR PRINT NAME OF INSTALLER)



(SIGNATURE OF INSTALLER)

Original sent to (*name of court*):

For installer use only: